



2834

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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	<b>Application Number</b>	10/191,693	
	<b>Filing Date</b>	March 4, 2002	
	<b>First Named Inventor</b>	Saraf, Shailendhar	
	<b>Group Art Unit</b>	2834	
	<b>Examiner Name</b>	Unassigned	
<b>Total Number of Pages in This Submission</b>	4	<b>Attorney Docket Number</b>	020048-001900US

**ENCLOSURES** (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
<b>Remarks</b>		The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

<b>Firm and Individual name</b>	Townsend and Townsend and Crew LLP Babak S. Sani	<b>Reg. No.</b> 37,495
<b>Signature</b>		
<b>Date</b>	9-26-02	

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On 9/26/02

TOWNSEND and TOWNSEND and CRAW LLP

By: London Clark

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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

Shally Saraf

Application No.: 10/191,693

Filed: March 4, 2002

For: METHOD AND APPARATUS FOR  
CONTROLLING ULTRASONIC  
TRANSDUCER

Examiner: Unassigned

Art Unit: 2834

SUPPLEMENTAL INFORMATION  
DISCLOSURE STATEMENT UNDER 37  
CFR §1.97 and §1.98

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Assistant Commissioner for Patents  
Washington, D.C. 20231

Sir:

The references cited on attached form PTO/SB/08A and PTO/SB/08B are being called to the attention of the Examiner. Copies of the references are enclosed. It is respectfully requested that the cited references be expressly considered during the prosecution of this application, be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

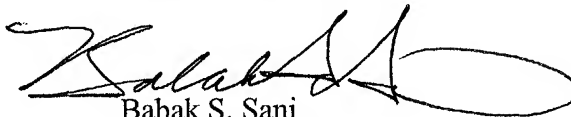
Shally Saraf  
Application No.: 10/191,693  
Page 2

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Applicant believes that no fee is required for submission of this statement.

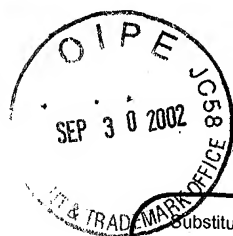
However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'Babak S. Sani', with a large, stylized loop at the end.

Babak S. Sani  
Reg. No. 37,495

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Substitute for form 1449B/PTO

**INFORMATION DISCLOSURE  
STATEMENT BY APPLICANT**

(use as many sheets as necessary)

Sheet 1 of 1

**Complete if Known**

Application Number	10/191,693
Filing Date	March 4, 2002
First Named Inventor	Saraf, Shailendhar
Art Unit	2834
Examiner Name	Unassigned
Attorney Docket Number	020048-001900US

**U.S. PATENT DOCUMENTS**

Examiner	Cite No. <sup>1</sup>	Document Number		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number	Kind Code <sup>2</sup> (if known)			
	AA	US-4,983,523		01/08/1991	Li et al.	
	AB	US-5,374,522		12/20/1994	Murphy et al.	
	AC	US-5,374,533		12/20/1994	Matsuzawa et al.	
	AD	US-5,639,423		06/17/1997	Northrup et al.	
	AE	US-5,646,039		07/08/1997	Northrup et al.	
	AF	US-5,652,141		07/29/1997	Henco et al.	
	AG	US-5,707,860		01/13/1998	Collis et al.	
	AH	US-5,840,878		11/24/1998	Collis et al.	
	AI	US-5,856,174		01/05/1999	Lipshutz et al.	
	AJ	US-5,874,046		02/23/1999	Megerle	
	AK	US-5,942,425		08/24/1999	Walters et al.	
	AL	US-5,962,310		10/05/1999	Collis et al.	
	AM	US-6,071,480		06/06/2000	Halaka	
	AN	US-6,100,084		08/08/2000	Miles et al.	
		US-				

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**FOREIGN PATENT DOCUMENTS**

Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>
		Country Code <sup>3</sup>	Number <sup>4</sup>	Kind Code <sup>5</sup> (if known)				
	AO	EP	0271448	A2 & A3	06/15/1988	Battelle Memorial Institute		<input type="checkbox"/>
	AP	EP	0337690	A1	10/18/1989	Gene-Trak Systems		<input type="checkbox"/>
	AQ	GB	938,163		10/02/1963	Derek John Craik		<input type="checkbox"/>
	AR	WO	98/38487	A2 & A3	09/03/1998	Cepheid		<input type="checkbox"/>
	AS	WO	99/33559	A1	07/08/1999	Cepheid		<input type="checkbox"/>
	AT	WO	00/60049	A1	10/12/2000	Biomerieux S.A.		<input type="checkbox"/>
	BA	WO	00/73413	A2 & A3	12/07/2000	Cepheid		<input type="checkbox"/>

Examiner  
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\* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

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